Case 19-40353-TLS Doc 1 Filed 03/07/19 Entered 03/07/19 16:00:34 Desc Main Document Page 1 of 51

| Fill in this information to identify your c | | |
|---|---|--------------------------------------|
| United States Bankruptcy Court for the: DISTRICT OF NEBRASKA | | |
| Case number (if known): | Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13 | ☐ Check if this is an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

| | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
|---|--|---|
| 1. Your full name | | |
| Write the name that is government-issued pic identification (for exan your driver's license or passport). | eture First Name | First Name Middle Name |
| | Aguilar | |
| Bring your picture identification to your m | Last Name eeting | Last Name |
| with the trustee. | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) |
| 2. All other names you | | |
| have used in the last years | 8 First Name | First Name |
| Include your married o | Middle Name r | Middle Name |
| maiden names. | Last Name | Last Name |
| 3. Only the last 4 digits your Social Security | of xxx - xx - <u>9</u> <u>5</u> <u>1</u> | |
| number or federal Individual Taxpayer | OR | OR |
| Identification numbe | 9xx - xx | 9xx - xx |

| De | btor 1 Marta L Aguilar | | Case number (if known) |
|----|--|--|--|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 4. | Any business names and Employer Identification Numbers | ✓ I have not used any business names or EINs | s. |
| | (EIN) you have used in the last 8 years | Business name | Business name |
| | Include trade names and | Business name | Business name |
| | doing business as names | Business name | Business name |
| | | | <u>= </u> |
| | | EIN | - |
| 5. | Where you live | EIIV | If Debtor 2 lives at a different address: |
| | | 1224 N Lincoln Ave | N |
| | | Number Street Grand Island | Number Street |
| | | NE | |
| | | NC | |
| | | City State ZIP Code | City State ZIP Code |
| | | Hall County | County |
| | | If your mailing address is different from | If Debtor 2's mailing address is different |
| | | the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | from yours, fill it in here. Note that the court will send any notices to you at this mailing address. |
| | | Number Street | Number Street |
| | | P.O. Box | P.O. Box |
| | | City State ZIP Code | City State ZIP Code |
| 6. | Why you are choosing | Check one: | Check one: |
| | this district to file for bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
| | | I have another reason. Explain. (See 28 U.S.C. § 1408.) | I have another reason. Explain. (See 28 U.S.C. § 1408.) |
| F | Part 2: Tell the Court A | bout Your Bankruptcy Case | |
| | | | |
| 7. | The chapter of the Bankruptcy Code you | Check one: (For a brief description of each, see Notifice Bankruptcy (Form 2010)). Also, go to the top of | otice Required by 11 U.S.C. § 342(b) for Individuals Filing page 1 and check the appropriate box. |
| | are choosing to file under | ☑ Chapter 7 | |
| | | Chapter 11 | |
| | | Chapter 12 | |
| | | Chapter 13 | |

| Deb | otor 1 Marta L | Aguilar | | | | Ca | ase numb | er (if known) | | |
|-----|----------------------------------|------------------|-------------|---|--|--|-----------------------------------|---|---|--------------------------|
| 8. | How you will pay | y the fee | G | ourt for more ay with cash, | details about how cashier's check, | w you may pay. ் | Typically If your a | , if you are pay attorney is subi | e clerk's office in a ring the fee yourse mitting your paymented address. | elf, you may |
| | | | | | | Iments. If you ch | | | and attach the App | olication for |
| | | | E t f | By law, a judge han 150% of the ee in installme | e may, but is not the official povert ents). If you choo | required to, waiv ty line that applie | e your fe s to your ou must | e, and may do family size an fill out the App | ou are filing for C so only if your inc d you are unable t lication to Have th | ome is less o pay the |
| 9. | Have you filed fo | ve you filed for | V | 10 | | | | | | |
| | bankruptcy with last 8 years? | in the | | es. | | | | | | |
| | | | Distric | et | | | When $\frac{1}{N}$ | IM / DD / YYYY | Case number _ | |
| | | | Distric | et | | | When _ | | Case number _ | |
| | | | Distric | :t | | | When _ | IM / DD / YYYY | Case number _ | |
| 10. | Are any bankrup | tcy | ☑ ¹ | lo | | | | | | |
| | cases pending o | • | | es. | | | | | | |
| | not filing this car | se with | Debto | r | | | | Relationsh | ip to you | |
| | partner, or by an | | Distric | | | | When _ | | Case number, _ | |
| | affiliate? | | | | | | N | IM / DD / YYYY | if known | |
| | | | Debto | r | | | | Relationsh | ip to you | |
| | | | Distric | | | | | | Case number, | |
| | | | | | | | | IM / DD / YYYY | | |
| 11. | Do you rent your residence? | r | | lo. Go to lin ′es. Has you | | ied an eviction ju | dgment a | against you? | | |
| | | | | Yes | | Statement About | | ion Judgment | Against You (Forn | n 101A) |

| Part 3: Report About Any Businesses You Own as a Sole Proprietor | Deb | otor 1 | Marta L Aguilar | | | | Case number (i | f known) | | |
|--|-----|--|--|------------|--------------------------|--|--|-----------------------------------|------------------------|----------------------------------|
| A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. If you have more than one sole proprietorship your business: Check the appropriate box to describe your business: Check the appropriate box to describe your business: If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor so that it can set appropriate box to describe your business. If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate box to describe your filing under Chapter 11. If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate box to describe your filing under Chapter 11. If you are filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy | P | art 3: | Report About An | ıy Bı | usine | sses You Own as a | a Sole Proprietor | | | |
| business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. If you have more than one sole proprietorship, use a separate sheet and tatach it to this petition. If you have more than one sole proprietorship, use a separate sheet and tatach it to this petition. If you have more than one sole group for the defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) | 12. | of any | full- or part-time | | | | usiness | | | |
| sole proprietorship, use a separate sheet and attach it to this petition. Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(51B)) Nou I am filing under Chapter 11, the court must know whether you are a small business debtor, you must attach you most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 101(61D). We I am not filing under Chapter 11, the court must know whether you are a small business debtor, you must attach you most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 101(61D). We | | business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than one sole proprietorship, use a separate sheet and attach it | | | | | | | | |
| Chapter 11 of the Bankruptcy Code and are you a small business debtor, you must attach you most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B). For a definition of small business debtor, see 11 U.S.C. § 101(51D). For a definition of small business debtor, see 11 U.S.C. § 101(51D). Am filing under Chapter 11, but I am NOT a small business debtor according to the definition the Bankruptcy Code. Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Yes. I am filing under Chapter 11 and | | | | | | Check the appropriate Health Care Busin Single Asset Rea Stockbroker (as of | ness (as defined in 11 U.S.C. § I Estate (as defined in 11 U.S.C defined in 11 U.S.C. § 101(53A) er (as defined in 11 U.S.C. § 10 | 101(27A)) :. § 101(51B)) | ZIP Co | de |
| For a definition of small business debtor, see 11 U.S.C. § 101(51D). Am filing under Chapter 11, but I am NOT a small business debtor according to the definition the Bankruptcy Code. Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Part 4: Report If You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attent No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code. Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Yes. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code. Yes. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code. Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Yes. I am filing under Chapter 1 | 13. | Chapter 11 of the Bankruptcy Code and | | can mos | <i>set ap</i> st rece | propriate deadlines. If you | you indicate that you are a smal nent of operations, cash-flow sta | I business deb atement, and fe | otor, you ederal in | must attach your come tax return |
| the Bankruptcy Code. The state of the State of the Bankruptcy Code. The state of the | | debtor | debtor? | | No. | I am not filing under C | hapter 11. | | | |
| Bankruptcy Code. Part 4: Report If You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent No Yes. What is the hazard? If immediate attention is needed, why is it needed? Where is the property? Number Street | | | | | No. | | ter 11, but I am NOT a small bu | siness debtor a | accordin | g to the definition in |
| Property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent No Yes. What is the hazard? If immediate attention is needed, why is it needed? Where is the property? Number Street | | • | | | Yes. | | ter 11 and I am a small busines | s debtor accor | ding to t | he definition in the |
| property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent Yes. What is the hazard? If immediate attention is needed, why is it needed? Where is the property? Number Street | Pa | art 4: | Report If You Ov | vn o | r Hav | e Any Hazardous F | Property or Any Property | / That Need | s Imm | ediate Attention |
| safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent If immediate attention is needed, why is it needed? Where is the property? Number Street | 14. | proper alleged immine | ty that poses or is I to pose a threat of ent and identifiable | | | What is the hazard? | | | | |
| perishable goods, or livestock that must be fed, or a building that needs urgent Where is the property? Number Street | | safety? | safety? Or do you own any property that needs | | | If immediate attention | is needed, why is it needed? | | | |
| | | perisha livestoo a buildi | ble goods, or ok that must be fed, or ong that needs urgent | | | Where is the property? | | | | |
| City State ZIP Code | | | | | | | City | <u></u> | tate | ZIP Code |

| Debtor 1 | Marta L Aguilar | Case number (if known) |
|----------|--|------------------------|
| | | |
| Part 5: | Explain Your Efforts to Receive a Briefing About Credi | t Counseling |

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

✓ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| ☐ I am not required to receive a briefing about credit counseling because of: | | | | | |
|---|----------------------------------|--|--|--|--|
| ☐ Incapacity. | I have a mental illness or a men | | | | |

Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case): You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

| Deb | otor 1 Marta L Aguilar | | | | Case number (if | know | n) |
|-----|---|----------|--|--------|--|-------|--|
| P | art 6: Answer These | Questic | ons for Reporting Pu | rpos | ses | | |
| 16. | What kind of debts do you have? | 16a. | | | sumer debts? Consumer de rimarily for a personal, family, | | re defined in 11 U.S.C. § 101(8) usehold purpose." |
| | | 16b. | money for a business or No. Go to line 16c. Yes. Go to line 17. | invest | ment or through the operation | of th | |
| | | 16c. | State the type of debts yo | ou ow | e that are not consumer or bus | sines | s debts. |
| 17. | Are you filing under Chapter 7? | | No. I am not filing under | Chap | oter 7. Go to line 18. | | |
| | Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | V | - | | • | - | xempt property is excluded and to distribute to unsecured creditors? |
| 18. | How many creditors do you estimate that you owe? | | 1-49 50-99 100-199 200-999 | | 1,000-5,000 5,001-10,000 10,001-25,000 | | 25,001-50,000 50,001-100,000 More than 100,000 |
| 19. | How much do you estimate your assets to be worth? | | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| 20. | How much do you estimate your liabilities to be? | | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |

| Debtor 1 | Marta L Aguilar | | Case number (if known) | | | |
|----------|-----------------|--|---|--|--|--|
| Part 7: | Sign Below | | | | | |
| For you | | I have examined this petition, and I declar and correct. | re under penalty of perjury that the information provided is true | | | |
| | | If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. | | | | |
| | | , . | pay or agree to pay someone who is not an attorney to help med read the notice required by 11 U.S.C. § 342(b). | | | |
| | | I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. | | | | |
| | | • | oncealing property, or obtaining money or property by fraud in sult in fines up to \$250,000, or imprisonment for up to 20 years, and 3571. | | | |
| | | X /s/ Marta L Aguilar Marta L Aguilar, Debtor 1 | XSignature of Debtor 2 | | | |
| | | Executed on 03/07/2019 | Executed on | | | |

MM / DD / YYYY

MM / DD / YYYY

Case 19-40353-TLS Doc 1 Filed 03/07/19 Entered 03/07/19 16:00:34 Desc Main Document Page 8 of 51

| Debtor 1 | Marta L Aguilar | | Case number (if know | n) | | | | |
|------------|--|--|----------------------------|------------------------------|--|--|--|--|
| represente | not represented by y, you do not need | I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect. | | | | | | |
| | | X /s/ DEREK L MITCHELL Signature of Attorney for Debtor | Date | 03/07/2019 MM / DD / YYYY | | | | |
| | | DEREK L MITCHELL Printed name DEREK L MITCHELL Firm Name P.O. BOX 1227 Number Street 102 N LOCUST ST | | | | | | |
| | | GRAND ISLAND City | NE State | 68802 ZIP Code | | | | |
| | | Contact phone (308) 384-6009 | Email address derek | _mitchell199@hotmail.com | | | | |
| | | 19984 Bar number | State | _ | | | | |

| Fill in this i | nformation to id | lentify your case | and this filing: | | |
|--|--|--|--|--|---------------------------------|
| Debtor 1 | Marta | L | Aguilar | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse, if filin | g) First Name | Middle Name | Last Name | | |
| United States F | Sankruptov Court for | the: DISTRICT OF | NERRASKA | | |
| | Sankruptcy Gourt for | uic. <u>DioTitioT Of</u> | NEDITAGITA | | |
| Case number (if known) | | | | - | if this is an ed filing |
| Official For | m 106A/B | | | | |
| Schedule A | A/B: Property | • | | | 12/15 |
| filing together, I sheet to this for Part 1: D | both are equally resum. On the top of an | sponsible for supply ny additional pages, esidence, Buildi | Be as complete and accurate a ing correct information. If mo write your name and case nut ng, Land, or Other Real E t in any residence, building, la | re space is needed, attach a simber (if known). Answer eve | separate ry question. |
| ✓ Yes. V | Where is the property | /? | | | |
| 1.1. 1224 N Lincol Street address, if av | n Ave /ailable, or other descript | Check all ☑ Singl | he property? that apply. e-family home ex or multi-unit building | Do not deduct secured clai amount of any secured clai Creditors Who Have Claim Current value of the | ims on <i>Schedule D:</i> |
| Grand Island | NE 688 | Cond | ominium or cooperative rfactured or mobile home | entire property? \$86,840.00 | portion you own? \$86,840.00 |
| City Hall County | State ZIP | _ | tment property share | Describe the nature of yo interest (such as fee simple entireties, or a life estate) | ole, tenancy by the |
| County | | Who has | an interest in the property? | owner | |
| | | Check on ☑ Debto ☐ Debto ☐ Debto | | Check if this is comm (see instructions) | nunity property |
| | | | ormation you wish to add abo | ut this item, such as local | |
| | | | of your entries from Part 1, in rite that number here | | \$86,840.00 |
| Part 2: D | escribe Your Vo | ehicles | | • | |
| - | | • | n any vehicles, whether they a also report it on Schedule G: Ex | _ | • |
| 3. Cars, vans, | , trucks, tractors, s | port utility vehicles, | motorcycles | | |
| □ No ▽ Yes | | | | | |

| Deb | tor 1 Marta L A | Aguilar | Cas | se number (if known) | |
|-------------|--|---------------------------|---|--|---|
| 3.1. Mak | | Chevy | Who has an interest in the property? Check one. | Do not deduct secured cla amount of any secured cla Creditors Who Have Claim | |
| Mod | - | Captiva | Debtor 1 only Debtor 2 only | Current value of the | Current value of the |
| Yea | - | 2013 | Debtor 1 and Debtor 2 only | entire property? | portion you own? |
| | roximate mileage: | 145,000 | At least one of the debtors and another | \$5,000.00 | \$5,000.00 |
| | | (approx. 145,000 | Check if this is community property (see instructions) | | |
| 4. | | | and other recreational vehicles, other veh al watercraft, fishing vessels, snowmobiles, m | | |
| 5. | Yes | ue of the nortion you | own for all of your entries from Part 2, inclu | uding any | |
| U . | | • • | Part 2. Write that number here | _ | \$5,000.00 |
| P | art 3: Descril | be Your Personal | and Household Items | | |
| Do | you own or have ar | ny legal or equitable ir | nterest in any of the following items? | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 6. | Household goods | • | | | |
| | | ppliances, furniture, lin | ens, china, kitchenware | | |
| | ☐ No ✓ Yes. Describe | bed, dresser, ch | nair | | \$500.00 |
| 7. | | | video, stereo, and digital equipment; compute | • | |
| | ✓ No✓ Yes. Describe | | | | |
| 8. | | es and figurines; paintin | gs, prints, or other artwork; books, pictures, o collections; other collections, memorabilia, col | • | |
| | ✓ No ☐ Yes. Describe | | | | |
| 9. | | photographic, exercise | e, and other hobby equipment; bicycles, pool t tools; musical instruments | ables, golf clubs, skis; | |
| | ✓ No Yes. Describe | | | | |
| 10. | • | rifles, shotguns, ammu | unition, and related equipment | | |
| | ✓ No ☐ Yes. Describe | | | | |
| 11. | | ay clothes, furs, leather | coats, designer wear, shoes, accessories | | |
| | ☐ No ✓ Yes. Describe | used clothing | | | \$300.00 |

| Deb | otor 1 Marta L Aguilar | | Case number (if known) | |
|-----|--|---|--|---|
| 12. | Jewelry Examples: Everyday jewelry, costum gold, silver | ne jewelry, engagement rings, wed | lding rings, heirloom jewelry, watches, gems, | |
| | ☑ No ☐ Yes. Describe | | | |
| 13. | Non-farm animals Examples: Dogs, cats, birds, horses | | | |
| | ✓ No ☐ Yes. Describe | | | |
| 14. | Any other personal and household did not list | items you did not already list, i | ncluding any health aids you | |
| | ✓ No Yes. Give specific information | | | |
| 15. | Add the dollar value of all of your of attached for Part 3. Write the num | entries from Part 3, including an ber here | y entries for pages you have | \$800.00 |
| Pa | art 4: Describe Your Finan | cial Assots | | |
| - | you own or have any legal or equita | ble interest in any of the followi | ng? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 16. | Cash Examples: Money you have in your petition | wallet, in your home, in a safe dep | osit box, and on hand when you file your | |
| | ☑ No ☐ Yes | | Cash: | · |
| 17. | Deposits of money Examples: Checking, savings, or otheroge houses, and of institution, list each. | | of deposit; shares in credit unions, ve multiple accounts with the same | |
| | □ No | | | |
| | ✓ Yes | Institution name: | | |
| | 17.1. Checking account: | Checking account | | \$47.89 |
| | 17.2. Savings account: | Savings account | | \$51.54 |
| 18. | Bonds, mutual funds, or publicly to Examples: Bond funds, investment and No | accounts with brokerage firms, mo | ney market accounts | |
| 19. | Non-publicly traded stock and inte | | ornorated businesses including | |
| 13. | an interest in an LLC, partnership, | - | orporated businesses, including | |
| | ✓ No Yes. Give specific information about | | | |
| | them Name o | entity: | % of ownership: | |

| Deb | tor 1 Marta L Aguilar | Case number (if known) |
|-----|---|--|
| 20. | Government and corporate bonds and other negotiable and non- Negotiable instruments include personal checks, cashiers' checks, p Non-negotiable instruments are those you cannot transfer to someor | romissory notes, and money orders. |
| | No Yes. Give specific information about them Issuer name: | |
| 21. | Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift sav profit-sharing plans | ings accounts, or other pension or |
| | No Yes. List each account separately. Type of account: Institution name: | |
| 22. | Security deposits and prepayments Your share of all unused deposits you have made so that you may on the examples: Agreements with landlords, prepaid rent, public utilities (companies, or others | |
| | ✓ No ☐ Yes Institution name or inc | dividual: |
| 23. | Annuities (A contract for a specific periodic payment of money to y ✓ No ✓ Yes | ວu, either for life or for a number of years) |
| 24. | Interests in an education IRA, in an account in a qualified ABLE 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). | program, or under a qualified state tuition program. |
| | ✓ No ☐ Yes Institution name and description. Separ | ately file the records of any interests. 11 U.S.C. § 521(c) |
| 25. | Trusts, equitable or future interests in property (other than anythowers exercisable for your benefit | ning listed in line 1), and rights or |
| | ✓ No Yes. Give specific information about them | |
| 26. | Patents, copyrights, trademarks, trade secrets, and other inteller <i>Examples:</i> Internet domain names, websites, proceeds from royalties ☑ No ☐ Yes. Give specific | |
| 27 | information about them | |
| 21. | Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative associa No | ntion holdings, liquor licenses, professional licenses |
| | Yes. Give specific information about them | |
| Mor | ney or property owed to you? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 28. | Tax refunds owed to you | |
| | ✓ No ✓ Yes. Give specific information | Federal: |
| | about them, including whether you already filed the returns | State: |
| | and the tax years | Local: |

| Deb | tor 1 Marta L Aguilar | Case number (if known) |
|-----|--|--|
| 29. | | ild support, maintenance, divorce settlement, property settlement |
| | ✓ No ☐ Yes. Give specific information | Alimony: |
| | _ | Maintenance: |
| | | Support: |
| | | Divorce settlement: |
| | | Property settlement: |
| 30. | Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disab compensation, Social Security benefits; unpaid loan No | · · · · · · · · · · · · · · · · · · · |
| | Yes. Give specific information | |
| 31. | Interests in insurance policies Examples: Health, disability, or life insurance; health savings and | ccount (HSA); credit, homeowner's, or renter's insurance |
| | ✓ No Yes. Name the insurance company of each policy and list its value | Beneficiary: Surrender or refund value: |
| 32. | Any interest in property that is due you from someone who If you are the beneficiary of a living trust, expect proceeds from entitled to receive property because someone has died | |
| | ✓ No✓ Yes. Give specific information | |
| 33. | Claims against third parties, whether or not you have filed a <i>Examples:</i> Accidents, employment disputes, insurance claims, | The state of the s |
| | ✓ No ☐ Yes. Describe each claim | |
| 34. | Other contingent and unliquidated claims of every nature, in rights to set off claims | ncluding counterclaims of the debtor and |
| | ✓ No Yes. Describe each claim | |
| 35. | Any financial assets you did not already list | |
| | ✓ No✓ Yes. Give specific information | |
| 36. | Add the dollar value of all of your entries from Part 4, includ attached for Part 4. Write that number here | £00 /2 |
| Pa | art 5: Describe Any Business-Related Property Y | ou Own or Have an Interest In. List any real estate in Part |
| 37. | Do you own or have any legal or equitable interest in any bu | usiness-related property? |
| | ✓ No. Go to Part 6. ✓ Yes. Go to line 38. | |

| Deb | tor 1 Marta L Aguilar | Case number (if known) | |
|-----|---|------------------------------|---|
| | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 38. | Accounts receivable or commissions you already earned | | · |
| | ✓ No ☐ Yes. Describe | | |
| 39. | Office equipment, furnishings, and supplies Examples: Business-related computers, software, modems, printers, copiers, fax desks, chairs, electronic devices | machines, rugs, telephones, | |
| | ✓ No ☐ Yes. Describe | | |
| 40. | Machinery, fixtures, equipment, supplies you use in business, and tools of you | our trade | |
| | ✓ No ☐ Yes. Describe | | |
| 41. | Inventory | | |
| | ✓ No ☐ Yes. Describe | | |
| 42. | Interests in partnerships or joint ventures | | |
| | ✓ No ☐ Yes. Describe Name of entity: | % of ownership: | |
| 43. | Customer lists, mailing lists, or other compilations | | |
| | No Yes. Do your lists include personally identifiable information (as defined No Yes. Describe | in 11 U.S.C. § 101(41A))? | |
| 44. | Any business-related property you did not already list | | |
| | ✓ No✓ Yes. Give specific information. | | |
| 45. | Add the dollar value of all of your entries from Part 5, including any entries fo attached for Part 5. Write that number here | or pages you have | \$0.00 |
| Pa | Describe Any Farm- and Commercial Fishing-Related Pro- If you own or have an interest in farmland, list it in Part 1. | perty You Own or Have a | n Interest In. |
| 46. | Do you own or have any legal or equitable interest in any farm- or commercia | al fishing-related property? | |
| | ✓ No. Go to Part 7. ☐ Yes. Go to line 47. | | |
| 47 | Form onimals | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 4/. | Farm animals Examples: Livestock, poultry, farm-raised fish | | |
| | ☑ No | | |
| | ☐ Yes | | |

| Debt | or 1 Marta L Aguilar | Case nu | mber (if known) | | |
|------|--|----------------------|------------------------------|---|-------------|
| 48. | Cropseither growing or harvested | | | | |
| | ✓ No ✓ Yes. Give specific information | | | | |
| 49. | Farm and fishing equipment, implements, machinery, fixtures, | and tools of trade | | | |
| | ☑ No □ Yes | | | | |
| 50. | Farm and fishing supplies, chemicals, and feed | | | | |
| | ☑ No □ Yes | | | | |
| 51. | Any farm- and commercial fishing-related property you did not | already list | | | |
| | ✓ No Yes. Give specific information | | | | |
| | Add the dollar value of all of your entries from Part 6, including attached for Part 6. Write that number here | | | · | \$0.00 |
| Pa | rt 7: Describe All Property You Own or Have an In | terest in That You D | oid Not List Abov | е | |
| | Do you have other property of any kind you did not already list Examples: Season tickets, country club membership | ? | | | |
| | ✓ No✓ Yes. Give specific information. | | | | |
| 54. | Add the dollar value of all of your entries from Part 7. Write the | at number here | | • | \$0.00 |
| Pa | rt 8: List the Totals of Each Part of this Form | | | | |
| | Part 1: Total real estate, line 2 | | | • | \$86,840.00 |
| 56. | Part 2: Total vehicles, line 5 | \$5,000.00 | | | |
| 57. | Part 3: Total personal and household items, line 15 | \$800.00 | | | |
| 58. | Part 4: Total financial assets, line 36 | \$99.43 | | | |
| 59. | Part 5: Total business-related property, line 45 | \$0.00 | | | |
| 60. | Part 6: Total farm- and fishing-related property, line 52 | \$0.00 | | | |
| 61. | Part 7: Total other property not listed, line 54 | \$0.00 | | | |
| 62. | Total personal property. Add lines 56 through 61 | \$5,899.43 | Copy personal property total | + | \$5,899.43 |
| 63. | Total of all property on Schedule A/B. Add line 55 + line 62 | | | | \$92,739.43 |

| Fill in this inf | ormation to i | dentify your o | case: | | | |
|--|--|--|---|--------------------------------|---|---|
| Debtor 1 | Marta | L | Aguilar | | | |
| Dahtan 2 | First Name | Middle Name | | | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States Ba | nkruptcy Court for | r the: DISTRICT | OF NEBRASKA | | | ☐ Check if this is an |
| Case number (if known) | | | | | | amended filing |
| Official Form | 106C | | | | _ | |
| Schedule C | The Prope | erty You Cl | aim as Exemp | ot | | 04/16 |
| Using the property | you listed on <i>Sch</i> Il out and attach t | nedule A/B: Prope to this page as m | erty (Official Form 10 | 6A/B |) as your source, list th | esponsible for supplying correct information. e property that you claim as exempt. If more essary. On the top of any additional pages, |
| is to state a speci exempted up to the receive certain be exemption of 100° property is determ | fic dollar amoun le amount of any nefits, and tax-e % of fair market nined to exceed | t as exempt. Alt applicable stat xempt retiremer value under a la that amount, you | ternatively, you may utory limit. Some ex nt fundsmay be unl w that limits the exe | claii cemp imite mpti | m the full fair market stionssuch as those ed in dollar amount. I | you claim. One way of doing so value of the property being for health aids, rights to However, if you claim an lar amount and the value of the le statutory amount. |
| rait i. ide | intilly the riop | berty Tou Ola | iiii as Exempt | | | |
| 1. Which set of | exemptions are | you claiming? | Check one only, | even | if your spouse is filing | with you. |
| ــــــــــــــــــــــــــــــــــــــ | - | | kruptcy exemptions. J.S.C. § 522(b)(2) | 11 U | .S.C. § 522(b)(3) | |
| _ | | | | | | |
| 2. For any prop | erty you list on S | Schedule A/B th | at you claim as exer | npt, 1 | fill in the information | below. |
| Brief description of Schedule A/B that | | | Current value of the portion you own | | ount of the emption you claim | Specific laws that allow exemption |
| | | | Copy the value from Schedule A/B | | eck only one box for th exemption | |
| Brief description: | | | \$86,840.00 | $\overline{\mathbf{Q}}$ | \$24,410.00 | Neb. Rev. Stat. §§ 40-101, 40-118 |
| 1224 N Lincoln | Ave | | | | 100% of fair market | |
| Line from Schedule | e A/B: 1.1 | | | | value, up to any applicable statutory limit | |
| Brief description: | | | \$5,000.00 | $\overline{\mathbf{V}}$ | \$0.00 | Neb. Rev. Stat. § 25-1556(e) |
| 2013 Chevy Cap | otiva (approx. 1 | 45,000 | | | 100% of fair market | |
| miles) Line from Schedule | e A/B: 3.1 | | | | value, up to any applicable statutory limit | |
| | | | | | | |
| - | • | - | more than \$160,375 | | led on or after the date | of adjustment \ |
| ☑ No | you acquire the | | | | ,215 days before you f | , |

| Debior 1 | Marta L Agullar | | Case numb | er (if known) |
|---|---|--------------------------------------|---|------------------------------------|
| Part 2: | Additional Page | | | |
| | ription of the property and line on A/B that lists this property | Current value of the portion you own | Amount of the exemption you claim | Specific laws that allow exemption |
| | | Copy the value from Schedule A/B | Check only one box for each exemption | |
| Brief descripted, dress | • | <u>\$500.00</u> | \$0.00 100% of fair market value, up to any applicable statutory limit | Neb. Rev. Stat. § 25-1556(c) |
| Brief descri used cloth Line from S | • | \$300.00 | \$0.00 100% of fair market value, up to any applicable statutory limit | Neb. Rev. Stat. § 25-1556(b) |
| Brief descri Checking Line from S | • | \$47.89 | \$47.89 100% of fair market value, up to any applicable statutory limit | Neb. Rev. Stat. § 25-1556(a) |
| Brief description Savings a Line from S | • | \$51.54 | \$51.54 100% of fair market value, up to any applicable statutory limit | Neb. Rev. Stat. § 25-1556(a) |

Case 19-40353-TLS Doc 1 Filed 03/07/19 Entered 03/07/19 16:00:34 Desc Main Document Page 18 of 51

| Fill in this info | ormation to ident | rify your caca: | | | | |
|--|---|--|------------------------|--|---|-----------------------------------|
| Debtor 1 | Marta First Name | L Middle Name | Aguilar Last Name | | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States Bar | kruptcy Court for the: | DISTRICT OF NE | BRASKA | | | |
| Case number (if known) | | | | | Check if this is amended filing | |
| Official Form | 106D | | | | | |
| Schedule D: | Creditors Wh | o Have Claim | s Secured by | Property | | 12/15 |
| 1. Do any credite No. Chec | No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. | | | | | |
| claim, list the c | ed claims. If a creditor separately for particular claim, list the ble, list the claims in a e. | each claim. If more e other creditors in P | than one Part 2. As | Column A Amount of claim Do not deduct the value of collateral | Column B Value of collateral that supports this claim | Column C Unsecured portion If any |
| 2.1 | | Describe the prosecures the claim | | \$7,000.00 | \$5,000.00 | \$2,000.00 |
| Reyna Auto Sale Creditor's name 411 N Vine St Number Street Grand Island | s | — 2013 Chevy C | | | | |
| As of the date you file, the claim is: Check all that apply. City State ZIP Code Unliquidated Disputed Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt As of the date you file, the claim is: Check all that apply. Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) | | | | | | |
| Date debt was incu | urred | Last 4 digits of | account number | | | |

Add the dollar value of your entries in Column A on this page. Write that number here:

\$7,000.00

Case 19-40353-TLS Doc 1 Filed 03/07/19 Entered 03/07/19 16:00:34 Desc Main Document Page 19 of 51

| Additional Page After listing any entries on this page, number them sequentially from the previous page. Describe the property that secures the claim: Porperty Describe the property that secures the claim: Property As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. At least one of the debtors and another coal account number Date debt was incurred Last 4 digits of account number CSCL DSP TM MAC N8235-04M WFENB/Slumberland CRESCL DSP TM MAC N8235-04M PO Box 14517 Des Moines IA As of the date you file, the claim is: Check all that apply. Describe the property that secures the claim: Column A Anount of claim that supports this claim relates to a community debt Date of the debtors and another coal account number CSCL DSP TM MAC N8235-04M Nowes the debt? Check one. Debtor 1 and Debtor 2 only Debtor 2 only Debtor 3 and Debtor 2 only Debtor 3 and Debtor 2 only D | Part 1: After listing any entries on this page, number them | | Case number (if known) | | | | |
|---|---|--|---|-----------------------------------|--|-------------------|--|
| Secures the claim: \$62,430.00 \$86,840.00 Property Secures the claim: \$562,430.00 \$86,840.00 Property As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. State ZIP Code Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Check iff this claim relates to a community debt Describe the property that secures the claim is: Check all that apply. Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 2 only Debtor 3 and Debtor 2 only Debtor 4 and Debtor 2 only Debtor 5 are Creditor's name CSCL DSP TM MAC N8235-04M Number Street PO Box 14517 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of Ilen. Check all that apply. Contingent Unliquidated Disputed Nature of Ilen. Check all that apply. Contingent Unliquidated Disputed Nature of Ilen. Check all that apply. Contingent Unliquidated Disputed Nature of Ilen. Check all that apply. Contingent Unliquidated Disputed Nature of Ilen. Check all that apply. Contingent Unliquidated Disputed Nature of Ilen. Check all that apply. Contingent Unliquidated Disputed Nature of Ilen. Check all that apply. Contingent Unliquidated Disputed Nature of Ilen. Check all that apply. Contingent Unliquidated Disputed Nature of Ilen. Check all that apply. Contingent Unliquidated Disputed Nature of Ilen. Check all that apply. Contingent Unliquidated Disputed Nature of Ilen. Check all that apply. Contingent Unliquidated Disputed Nature of Ilen. Check all that apply. Contingent Unliquidated Disputed Nature of Ilen. Check all that apply. Contingent Unliquidated Disputed Nature of Ilen. Check all that apply. Contingent Unliquidated Disputed Nature of Ilen. Check all that apply. Contingent Unliquidated Disputed Nature of Ilen. Check all that apply. Contingent Unliquidated Disputed Nature of Ilen. Check all that apply. Contingent Unliquidated Disputed Nature o | | | | Amount of claim Do not deduct the | Value of collateral that supports this | Unsecured portion | |
| Number Street Beaverton | Seterus Inc | e | secures the claim: | \$62,430.00 | \$86,840.00 | | |
| Contingent City State ZIP Code Disputed Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 onlogen Debtor 2 only Debtor 1 onlogen Debtor 2 only De | Number Str | eet | | | | | |
| City State ZiP Code Who owes the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ Check if this claim relates to a community debt □ Check if this claim relates to a community debt □ Check if this claim relates to a community debt □ Check if this claim relates to a community debt □ Check if this claim relates to a community debt □ Check if this claim relates to a community debt □ Check if this claim relates to a community debt □ Check if this claim relates to a community debt □ Check if this claim relates to a community debt □ Check if this claim relates to a community debt □ Check if this claim relates to a community debt □ Check if this claim relates to a community debt □ Disputed Nature of lien. Check all that apply. □ Check if this claim relates to a community debt □ Disputed Nature of lien. Check all that apply. □ Check if this claim relates to a community debt □ Check if this claim relates to a community debt □ Disputed Nature of lien. Check all that apply. □ Check if this claim relates to a community debt □ Disputed □ | OR | | Contingent | Check all that apply. | | | |
| Describe the property that secures the claim: WFFNB/Slumberland Creditor's name CSCL DSP TM MAC N8235-04M Number Street P O Box 14517 Des Moines IA As of the date you file, the claim is: Check all that apply. City State ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another At least one of the debtors and another Check if this claim relates to a community debt Describe the property that secures \$887.00 \$0.00 \$8887.00 \$0.00 \$8887.00 \$0.00 \$8887.00 | Who owes the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim relates | | □ Disputed Nature of lien. Check all that apply. □ An agreement you made (such as mortgage or secured car loan) □ Statutory lien (such as tax lien, mechanic's lien) □ Judgment lien from a lawsuit | | | | |
| secures the claim: WFNB/Slumberland Creditor's name CSCL DSP TM MAC N8235-04M Number Street P O Box 14517 Des Moines IA City State ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 anly Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt secures the claim: \$887.00 \$0.00 \$887.00 \$0.00 \$887.00 \$0.00 \$887.00 \$0.00 \$887.00 \$0.00 | | • | Last 4 digits of account number | 2 7 1 8 | | | |
| City State ZIP Code Check one. Check all that apply. Contingent Unliquidated Disputed | WFFNB/SIO Creditor's name CSCL DSP Number Str | et N8235-04M | secures the claim: | \$887.00 | \$0.00 | \$887.00 | |
| City State ZIP Code | | | Contingent | Check all that apply. | | | |
| to a community debt | Who owes t Debtor 1 Debtor 2 Debtor 1 At least | he debt? Check one. only only and Debtor 2 only one of the debtors and another | Disputed Nature of lien. Check all that apply. ✓ An agreement you made (such as ─ Statutory lien (such as tax lien, me | | car loan) | | |
| Pate about the mount of the fact of decorate indiffer to the fact of the fact | to a con | nmunity debt | Last 4 digits of account number | 0 5 2 9 | | | |

Add the dollar value of your entries in Column A on this page. Write that number here:

\$63,317.00

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$70,317.00

| | | | | _ | | |
|---|--|---|---|---|---|---|
| Fill in this inf | ormation to ide | ntify your ca | ase: | | | |
| Debtor 1 | Marta | L | Aguilar | | | |
| Debioi 1 | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| | | | | | | |
| United States Bar | nkruptcy Court for the | e: DISTRICT | OF NEBRASKA | | | |
| Case number | | | | | Check if this is a | an |
| (if known) | | | | | amended filing | an |
| 0.60 | 400E/E | | | J | | |
| Official Form | 106E/F | | | | | |
| Schedule E/ | F: Creditors | Who Have | Unsecured Claims | | | 12/15 |
| claims. List the or on Schedule A/B: Do not include any if more space is n to this page. On t | ther party to any ex Property (Official F y creditors with par eeded, copy the Pa | ecutory contra form 106A/B) a tially secured rt you need, fil onal pages, w | t 1 for creditors with PRIORITY classes that coul acts or unexpired leases that coul and on Schedule G: Executory Colclaims that are listed in Schedule I it out, number the entries in the rite your name and case number (ecured Claims | d result in a claim. A ntracts and Unexpire D: Creditors Who H boxes on the left. At | Also list executor d Leases (Officia old Claims Secur | y contracts il Form 106G). red by Property. |
| | tors have priority u | | | | | |
| | | isecureu ciairi | is against you? | | | |
| ✓ No. Go t ☐ Yes. | o Part 2. | | | | | |
| claim. For eac show both pric more space is | ch claim listed, ident ority and nonpriority a | ify what type of amounts. As m insecured claim | creditor has more than one priority un claim it is. If a claim has both priori uch as possible, list the claims in all hs, fill out the Continuation Page of | ity and nonpriority amo phabetical order acco | ounts, list that clain | m here and or's name. If |
| (For an explar | nation of each type o | f claim, see the | instructions for this form in the inst | ruction booklet. | | |
| | | | | Total claim | Priority | Nonpriority |
| 2.1 | | | | | amount | amount |
| | | | | | | |
| Priority Creditor's Nam | е | | Last 4 digits of account number | | | |
| Number Street | | | When was the debt incurred? | | _ | |
| | | | As of the date you file, the claim | is: Check all that app | lv. | |
| | | | Contingent | | -,- | |
| | | | Unliquidated | | | |
| City | State ZIF | Code | Disputed | | | |
| Who incurred the | debt? Check one | | Type of PRIORITY unsecured cla | im: | | |
| Debtor 1 only Debtor 2 only | | | Domestic support obligations | | | |
| Debtor 1 and D | Debtor 2 only | | Taxes and certain other debts Claims for death or personal in | | ent | |
| | the debtors and ano | ther | intoxicated | ijary wrine you were | | |
| Check if this o | laim is for a comm | unity debt | Other. Specify | | | |
| Is the claim subject | ct to offset? | | _ ` | | | |
| □ No □ Yes | | | | | | |

| Debtor 1 | Marta L Aguilar | Case number (if known) | |
|---|---|--|----------------|
| Part 2: | List All of Your NONPRIORIT | Y Unsecured Claims | |
| _ | • | claims against you? Submit this form to the court with your other schedules. | |
| If a cree type of | ditor has more than one nonpriority unsection it is. Do not list claims already incl | in the alphabetical order of the creditor who holds each claim. cured claim, list the creditor separately for each claim. For each claim listed uded in Part 1. If more than one creditor holds a particular claim, list the otl unsecured claims, fill out the Continuation Page of Part 2. | |
| | | | Total claim |
| Nonpriority Cre 9301 Oakd Number S Chatswort CA | Iale Ave Suite 205 Street | Last 4 digits of account number 6 8 8 8 When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: | \$157.00 |
| Debtor Debtor Debtor At least Check is the claim Yes | 1 only | Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify Credit Card | |
| Nonpriority Cre P O Box 30 Number S Salt Lake 0 UT City | O258 Street City State ZIP Code ed the debt? Check one. 1 only | Last 4 digits of account number 0 8 0 6 When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce | <u>*698.00</u> |
| Debtor At least Check i | 1 and Debtor 2 only one of the debtors and another if this claim is for a community debt subject to offset? | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card | |

| Debtor 1 Marta L Aguilar | Case number (if known) | |
|---|---|-------------|
| Part 2: Your NONPRIORITY Unsecu | red Claims Continuation Page | |
| After listing any entries on this page, number the previous page. | em sequentially from the | Total claim |
| 4.3 | | \$5,366.00 |
| CB-Younkers | Last 4 digits of account number 1 1 5 8 | |
| Nonpriority Creditor's Name P O Box 182789 | When was the debt incurred? | |
| Number Street | As of the date you file, the claim is: Check all that apply. | |
| Columbus | | |
| ОН | Disputed | |
| City State ZIP Code | Type of NONPRIORITY unsecured claim: | |
| Who incurred the debt? Check one. | ☐ Student loans | |
| Debtor 1 only Debtor 2 only | Obligations arising out of a separation agreement or divorce | |
| Debtor 1 and Debtor 2 only | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| At least one of the debtors and another | ✓ Other. Specify | |
| Check if this claim is for a community debt | Credit Card | |
| Is the claim subject to offset? ✓ No | | |
| ✓ No Yes | | |
| 4.4 | | |
| Chase Bank USA | Last 4 digits of account number 0 2 7 2 | \$305.00 |
| Nonpriority Creditor's Name | Last 4 digits of account number0272_ When was the debt incurred? | |
| P.O. Box 15298 Number Street | As of the date you file, the claim is: Check all that apply. | |
| - Cucci | Contingent | |
| | Unliquidated | |
| Wilmington DE 19850 | Disputed | |
| City State ZIP Code Who incurred the debt? Check one. | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 only | Student loans Obligations origing out of a congretion agreement or diverse | |
| Debtor 2 only | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| Debtor 1 and Debtor 2 only At least one of the debtors and another | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| Check if this claim is for a community debt | ✓ Other. Specify Credit Card | |
| Is the claim subject to offset? | Credit Card | |
| ☑ No | | |
| Yes | | |
| 4.5 | | \$3,267.00 |
| Citibank | Last 4 digits of account number 3 5 6 0 | |
| Nonpriority Creditor's Name P O Box 790110 | When was the debt incurred? | |
| Number Street | As of the date you file, the claim is: Check all that apply. | |
| St Louis | Contingent | |
| MO | ☑ Unliquidated □ □ Disputed | |
| City State ZIP Code | Type of NONDRIORITY unsecured claims | |
| Who incurred the debt? Check one. | Type of NONPRIORITY unsecured claim: ☐ Student loans | |
| Debtor 1 only | ☐ Obligations arising out of a separation agreement or divorce | |
| Debtor 2 only Debtor 1 and Debtor 2 only | that you did not report as priority claims | |
| At least one of the debtors and another | ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify | |
| Check if this claim is for a community debt | ✓ Other. Specify Credit Card | |
| Is the claim subject to offset? | | |
| No Yes | | |
| ☐ Yes | | |

| Debtor 1 Marta L Aguilar | Case number (if known) | |
|---|---|-------------|
| Part 2: Your NONPRIORITY Unsecu | red Claims Continuation Page | |
| After listing any entries on this page, number the previous page. | m sequentially from the | Total claim |
| 4.6 | | \$3,185.00 |
| Kohl's Department Store | Last 4 digits of account number 6 9 5 1 | |
| Nonpriority Creditor's Name P.O. Box 3115 | When was the debt incurred? | |
| Number Street | As of the date you file, the claim is: Check all that apply. | |
| | _ ☐ Contingent ☐ Unliquidated | |
| | ☐ ☐ Disputed | |
| Milwaukee WI 53201 City State ZIP Code | Type of NONDRIGHTY ungequired claims | |
| Who incurred the debt? Check one. | Type of NONPRIORITY unsecured claim: ☐ Student loans | |
| Debtor 1 only | Obligations arising out of a separation agreement or divorce | |
| Debtor 2 only Debtor 1 and Debtor 2 only | that you did not report as priority claims | |
| At least one of the debtors and another | ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify | |
| ☐ Check if this claim is for a community debt | Credit Card | |
| Is the claim subject to offset? | | |
| ✓ No ☐ Yes | | |
| | | |
| 4.7 | | \$3,267.00 |
| Sears/CBNA Nonpriority Creditor's Name | _ Last 4 digits of account number 4 3 1 9 | |
| P O Box 6282 | When was the debt incurred? | |
| Number Street Sioux Falls | As of the date you file, the claim is: Check all that apply. Contingent | |
| SD | ☐ Unliquidated | |
| - | Disputed | |
| City State ZIP Code | Type of NONPRIORITY unsecured claim: | |
| Who incurred the debt? Check one. Debtor 1 only | Student loans | |
| Debtor 2 only | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| Debtor 1 and Debtor 2 only | Debts to pension or profit-sharing plans, and other similar debts | |
| ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt | Other. Specify | |
| Is the claim subject to offset? | Credit Card | |
| No No | | |
| Yes | | |
| 4.8 | | \$300.00 |
| SYNCB/JC PENNY | Last 4 digits of account number 8 3 5 6 | Ψ300.00 |
| Nonpriority Creditor's Name | When was the debt incurred? | |
| P.O. BOX 965007 Number Street | As of the date you file, the claim is: Check all that apply. | |
| ORLANDO | _ Contingent | |
| <u>FL</u> | ☑ Unliquidated □ □ Disputed | |
| City State ZIP Code | | |
| Who incurred the debt? Check one. | Type of NONPRIORITY unsecured claim: ☐ Student loans | |
| Debtor 1 only | Obligations arising out of a separation agreement or divorce | |
| Debtor 2 only Debtor 1 and Debtor 2 only | that you did not report as priority claims | |
| At least one of the debtors and another | ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify | |
| Check if this claim is for a community debt | Credit Card | |
| Is the claim subject to offset? | | |
| ✓ No Yes | | |

| Debtor 1 | Marta L Aguilar | Case number (if known) | |
|--|---|---|-------------|
| Part 2: | Your NONPRIORITY Unsecu | red Claims Continuation Page | |
| After listing previous previou | ng any entries on this page, number the page. | m sequentially from the | Total claim |
| | Street | Last 4 digits of account number 8 1 6 9 When was the debt incurred? As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed | |
| Debtor Debtor Debtor At leas Check | State ZIP Code rred the debt? Check one. r 1 only r 2 only r 1 and Debtor 2 only st one of the debtors and another x if this claim is for a community debt m subject to offset? | Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card | |

| Debtor 1 | Marta L Aguilar | Case number (if known) |
|----------|--|------------------------|
| Part 4: | Add the Amounts for Each Type of Unsecured Claim | |
| | - | |

Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

| | | | | Total claim |
|--------------------------|-----|---|--------------|-------------|
| Total claims from Part 1 | 6a. | Domestic support obligations | 6a. | \$0.00 |
| | 6b. | Taxes and certain other debts you owe the government | 6b. | \$0.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. - | \$0.00 |
| | 6e. | Total. Add lines 6a through 6d. | 6d. | \$0.00 |
| | | | | Total claim |
| Total claims from Part 2 | 6f. | Student loans | 6f. | \$0.00 |
| | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. - | \$17,459.00 |
| | 6j. | Total. Add lines 6f through 6i. | 6j. | \$17,459.00 |

Case 19-40353-TLS Doc 1 Filed 03/07/19 Entered 03/07/19 16:00:34 Desc Main Document Page 26 of 51

| Fill in this inf | ormation to id | | | | |
|---------------------------------|---------------------|-------------------------|----------------------|---|------------------------------------|
| Debtor 1 | Marta First Name | L Middle Name | Aguilar Last Name | - | |
| Debtor 2 (Spouse, if filing) | | Middle Name | Last Name | - | |
| United States Ba | nkruptcy Court for | the: DISTRICT OF | NEBRASKA | _ | |
| Case number (if known) | | | | | Check if this is an amended filing |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.

 Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

| Fill in this inf | ormation to | identify your case | | |
|--|--|--|--|---|
| Debtor 1 | Marta | L | Aguilar | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | _ |
| United States Ba | nkruptcy Court fo | or the: DISTRICT OF | NEBRASKA | |
| Case number (if known) | | | | ☐ Check if this is an amended filing |
| Official Form | 106H | | | |
| Schedule H | : Your Cod | lebtors | | 12/1 |
| page. On the top 1. Do you have No Yes 2. Within the last include Arizor No. Go to Yes. Diction | any codebtors? st 8 years, have na, California, Ida to line 3. d your spouse, for | al Pages, write your n (If you are filing a journ you lived in a commu aho, Louisiana, Nevada | ame and case number (if int case, do not list either s nity property state or teri | ritory? (Community property states and territories , Texas, Washington, and Wisconsin.) |
| person show creditor on S | list all of your o on in line 2 again Schedule D (Offi | n as a codebtor only if | that person is a guaranto dule E/F (Official Form 1 | debtor if your spouse is filing with you. List the or or cosigner. Make sure you have listed the 16E/F), or <i>Schedule G</i> (Official Form 106G). Use |
| Column 1: | Your codebtor | | | Column 2: The creditor to whom you owe the debt |
| | | | | Check all schedules that apply: |
| 3.1 Levi Don | | | | Schedule D, line 2.2 |
| 1224 N L Number | incoln Ave Street | | | Schedule E/F, line |
| Grand Is | land | | | Schedule G, line |
| | | | | Seterus Inc |
| City | | State | ZIP Code | |

| F | ill in this inforn | nation to | identify your case | e: | | | | | |
|------------------------|---|--|---|-----------------------------|---|----------------|-------------------|------------------------------|---|
| | Debtor 1 | Marta | L | | Aguilar | | | | |
| | | First Name | Middle Nam | Э | Last Name | | | Cho | eck if this is: |
| | Debtor 2 (Spouse, if filing) | First Name | Middle Nam | <u></u> е | Last Name | | | | An amended filing |
| | United States Bank | ruptcy Court | for the: DISTRICT | OF N | EBRASKA | | | ㅁ | A supplement showing postpetition |
| | Case number | | | | | _ | | | chapter 13 income as of the following date: |
| L | (if known) | | | | | | | | MM / DD / YYYY |
| | fficial Form 10 chedule I: Yo | | mo | | | | | | 12/15 |
| _ | | | | | | | | | |
| res ind ab yo | sponsible for supply clude information all out your spouse. If our name and case r | ying correct bout your s f more spac | t information. If you pouse. If you are sep e is needed, attach a nown). Answer ever | are ma parated separa | arried and not d and your spe ate sheet to th | filing ouse | jointly is not | y, and your filing with y | d Debtor 2), both are equally spouse is living with you, you, do not include information any additional pages, write |
| 1. | Fill in your emplo | oyment | | | - lada - a - d | | | | Dahtan Can man filim a mana |
| | If you have more t | | F | _ | ebtor 1 | | | | Debtor 2 or non-filing spouse |
| | job, attach a sepa with information al | | Employment status | ; ∟ | Employed Not employ | ed | | | ☐ Employed☐ Not employed |
| | additional employe | ers. | Occupation | | | | | | |
| | Include part-time, or self-employed v | | Employer's name | | | | | | |
| | Occupation may in | nclude | Employer's addres | _ | | | | | |
| | student or homem applies. | | Employer's address | _ | umber Street | | | | Number Street |
| | | | | _ | | | | | |
| | | | | _ | | | | | |
| | | | | Cit | ty | | State | Zip Code | City State Zip Code |
| | | | How long employed | d there | ? | | | _ | |
| F | Part 2: Give D | Details Ab | out Monthly Inco | me | | | | | |
| | stimate monthly inco | | | orm. If | you have noth | ning t | o repor | t for any line | e, write \$0 in the space. Include your |
| | | | ve more than one emploarate sheet to this for | | ombine the inf | orma | tion for | all employe | ers for that person on the lines below. If |
| | | | | | | | For I | Debtor 1 | For Debtor 2 or non-filing spouse |
| 2. | | | alary, and commission of monthly, calculate w | | | 2. | _ | \$0.00 | |
| 3. | Estimate and list | monthly ov | vertime pay. | | | 3. | + | \$0.00 | |
| 4. | Calculate gross i | ncome. Ad | dd line 2 + line 3. | | | 4. | | \$0.00 | |

Official Form 106l Schedule I: Your Income page 1

| Deb | tor 1 | Marta L Aguilar | | Case num | nber | (if know | n) | | | |
|-----|---------|--|---------|------------------------|---------|-----------------------|----------|-----|-----------------|--------------|
| | | | | For Debtor 1 | | or Debto on-filing | |) | | |
| | Сор | by line 4 here | 4. | \$0.00 | | | | _ | | |
| 5. | List | all payroll deductions: | | | | | | | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 5a. | \$0.00 | | | | | | |
| | 5b. | Mandatory contributions for retirement plans | 5b. | <u>\$0.00</u> | | | | | | |
| | 5c. | Voluntary contributions for retirement plans | 5c. | \$0.00 | | | | | | |
| | 5d. | Required repayments of retirement fund loans | 5d. | \$0.00 | | | | | | |
| | 5e. | Insurance | 5e. | \$0.00 | | | | | | |
| | 5f. | Domestic support obligations | 5f. | \$0.00 | | | | | | |
| | 5g. | Union dues | 5g. | \$0.00 | | | | | | |
| | 5h. | Other deductions. Specify: | 5h.• | ÷ <u>\$0.00</u> | | | | | | |
| 6. | | I the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5h. | 6. | \$0.00 | - | | | | | |
| 7. | Cald | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$0.00 | _ | | | | | |
| 8. | | all other income regularly received: | | | | | | | | |
| | 8a. | Net income from rental property and from operating a business, profession, or farm | 8a. | \$0.00 | - | | | | | |
| | | Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | | | | | | | | |
| | 8b. | Interest and dividends | 8b. | \$0.00 | | | | | | |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive | 8c. | \$0.00 | - | | | | | |
| | | Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | | | | | | | | |
| | 8d. | Unemployment compensation | 8d. | \$0.00 | | | | | | |
| | 8e. | Social Security | 8e. | \$720.00 | - | | | | | |
| | 8f. | Other government assistance that you regularly receive | | | - | | | | | |
| | | Include cash assistance and the value (if known) or any non- cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. | | | | | | | | |
| | | Specify: | 8f. | \$0.00 | | | | | | |
| | 8g. | Pension or retirement income | 8g. | \$0.00 | | | | | | |
| | 8h. | Other monthly income. Specify: | 8h. | + \$0.00 | - | | | | | |
| 9. | Add | l all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h. | 9. | \$720.00 | | | | | | |
| 10. | | culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10. | \$720.00 | + [| | | =[| \$ | 720.00 |
| 11. | Stat | te all other regular contributions to the expenses that you list in S | chedi | ule J. | | | | | | |
| | Inclu | ude contributions from an unmarried partner, members of your househods or relatives. | | | r roc | mmates | , and ot | her | | |
| | Do r | not include any amounts already included in lines 2-10 or amounts tha | t are ı | not available to pay e | xpe | nses liste | ed in Sc | hed | ule J. | |
| | Spe | cify: | | | | | 11. | + | | \$0.00 |
| 12. | | I the amount in the last column of line 10 to the amount in line 11. | | | | | 12. | | \$ | 720.00 |
| | if it a | applies. | | | J. 1116 | | | | Combine monthly | ed income |
| 13. | Doy | you expect an increase or decrease within the year after you file t | his fo | rm? | | | | | | |
| | | No. None. Yes. Explain: | | | | | | | | |
| | | | | | | | | | | |

| Ē | ill in this inforn | nation to ider | ntify your case: | | | QI. | . I. SE ALS | • | |
|-----|--|--|--|-----------------|--|---------|-------------|---|---------------------------------|
| | Debtor 1 | Marta | ı | Aguil | ar | I | ck if this | s is: ended filing | |
| | Deptor 1 | First Name | Middle Name | Last Na | | $\ \ $ | A supp | ended ming lement showing r 13 expenses a | |
| | Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Na | ame | | | ng date: | is of the |
| | United States Bankı | ruptcy Court for t | he: DISTRICT OF | NEBRASKA | A | | MM / D | DD / YYYY | |
| | Case number (if known) | | | | | | | | |
| O | fficial Form 10 |)6J | | | | J | | | |
| So | chedule J: Yo | our Expens | es | | | | | | 12/15 |
| naı | rrect information. I | f more space is | needed, attach ano nswer every question | ther sheet to t | ing together, both ar this form. On the top | | | | |
| 1. | Is this a joint cas | e? | | | | | | | |
| 2. | No Yes | Sebtor 2 live in a s. Debtor 2 must endents? | separate househol tifle Official Form 10 No Yes. Fill out this | 6J-2, Expense | s for Separate Housel Dependent's relati | onshi | | Dependent's | Does dependent |
| | Do not list Debtor Debtor 2. | 1 and L | for each depende | | Debtor 1 or Debtor | r 2 | | age | _ <u>live with you?</u> ☐ No |
| | Do not state the denames. | ependents' | | | | | | | - |
| 3. | Do your expense expenses of peopyourself and you | ole other than | ✓ No ☐ Yes | | | | | | − |
| P | art 2: Estima | ate Your Ong | oing Monthly Ex | penses | | | | | |
| to | | of a date after t | he bankruptcy is file | - | re using this form as supplemental Sche | | | | |
| | | | ash government ass on Schedule I: You | | | | | Your expens | ses |
| 4. | | | spenses for your res | | | | | 4 | \$200.00 |
| | If not included in | line 4: | | | | | | | |
| | 4a. Real estate ta | axes | | | | | | 4a | |
| | 4b. Property, hor | neowner's, or rer | iter's insurance | | | | | 4b | |
| | 4c. Home mainte | enance, repair, ar | nd upkeep expenses | | | | | 4c | |
| | 4d. Homeowner's | s association or c | condominium dues | | | | | 4d | |

| Deb | otor 1 Marta L Aguilar | Case number (if known) | |
|-----|---|------------------------|----------|
| | | Your expenses | |
| 5. | Additional mortgage payments for your residence, such as home equity loans | 5. | |
| 6. | Utilities: | | |
| | 6a. Electricity, heat, natural gas | 6a | |
| | 6b. Water, sewer, garbage collection | 6b | |
| | 6c. Telephone, cell phone, Internet, satellite, and cable services | 6c | \$50.00 |
| | 6d. Other. Specify: | 6d | |
| 7. | Food and housekeeping supplies | 7. | \$150.00 |
| 8. | Childcare and children's education costs | 8. | |
| 9. | Clothing, laundry, and dry cleaning | 9. | |
| 10. | Personal care products and services | 10. | |
| 11. | Medical and dental expenses | 11. | |
| 12. | Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. | 12. | |
| 13. | Entertainment, clubs, recreation, newspapers, magazines, and books | 13. | |
| 14. | Charitable contributions and religious donations | 14. | |
| 15. | Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. | | |
| | 15a. Life insurance | 15a | |
| | 15b. Health insurance | 15b. | \$20.00 |
| | 15c. Vehicle insurance | 15c | |
| | 15d. Other insurance. Specify: | 15d. | |
| 16. | Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: | 16. | |
| 17. | Installment or lease payments: | | |
| | 17a. Car payments for Vehicle 1 chevy captiva | 17a | \$300.00 |
| | 17b. Car payments for Vehicle 2 | 17b | |
| | 17c. Other. Specify: | 17c | |
| | 17d. Other. Specify: | 17d | |
| 18. | Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). | 40 | |
| 19. | Other payments you make to support others who do not live with you. Specify: | 19. | |

| Deb | tor 1 | Marta L Aguilar | Case number (if known |) |
|-----|----------|---|-----------------------|----------|
| 20. | | real property expenses not included in lines 4 or 5 of this form or on dule I: Your Income. | | |
| | 20a. | Mortgages on other property | 20a. | |
| | 20b. | Real estate taxes | 20b. | |
| | 20c. | Property, homeowner's, or renter's insurance | 20c. | |
| | 20d. | Maintenance, repair, and upkeep expenses | 20d. | |
| | 20e. | Homeowner's association or condominium dues | 20e. | |
| 21. | Other | . Specify: | 21. + | |
| 22. | Calcu | late your monthly expenses. | _ | |
| | 22a. | Add lines 4 through 21. | 22a. | \$720.00 |
| | 22b. | Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2. | 22b. | |
| | 22c. | Add line 22a and 22b. The result is your monthly expenses. | 22c. | \$720.00 |
| 23. | Calcu | late your monthly net income. | | |
| | 23a. | Copy line 12 (your combined monthly income) from Schedule I. | 23a. | \$720.00 |
| | 23b. | Copy your monthly expenses from line 22c above. | 23b. _ | \$720.00 |
| | 23c. | Subtract your monthly expenses from your monthly income. The result is your monthly net income. | 23c. | \$0.00 |
| 24. | Do yo | ou expect an increase or decrease in your expenses within the year after you | file this form? | |
| | | xample, do you expect to finish paying for your car loan within the year or do you e ent to increase or decrease because of a modification to the terms of your mortga | | |
| | V | No | | |
| | □ ` | Yes. Explain here: None. | | |
| | | | | |
| | | | | |

Case 19-40353-TLS Doc 1 Filed 03/07/19 Entered 03/07/19 16:00:34 Desc Main Document Page 33 of 51

| D | ebtor 1 | Marta | L | Aguilar | | |
|------------|----------------------|----------------------|---|--|--|-----------------------|
| | | First Name | Middle Name | Last Name | | |
| | ebtor 2 | | | | | |
| (S | Spouse, if filing) | First Name | Middle Name | Last Name | | |
| U | nited States Ba | nkruptcy Court fo | or the: DISTRICT OF | NEBRASKA | | |
| | ase number known) | | | | ☐ Check i | f this is an |
| (11 | KIIOWII) | | | | amende | ed filing |
| | ficial Form | | | | | |
| Sι | ımmary of | f Your Asse | ets and Liabilit | ies and Certain S | tatistical Information | 12/15 |
| cor sch | rect information | on. Fill out all of | your schedules first; inal forms, you must | then complete the inform | er, both are equally responsible fo ation on this form. If you are filing d check the box at the top of this | g amended |
| | | | | | | Your assets |
| | | | | | | Value of what you own |
| 1. | Schedule A/B | : Property (Official | al Form 106A/B) | | | |
| | 1a. Copy line | e 55, Total real es | state, from Schedule A | /B | | \$86,840.00 |
| | 1b. Copy line | e 62, Total persor | nal property, from Sche | edule A/B | | \$5,899.43 |
| | 1c. Copy line | e 63, Total of all բ | property on Schedule A | √B | | \$92,739.43 |
| Р | art 2: Su | mmarize You | r Liabilities | | | |
| | | | | | | Your liabilities |
| | | | | | | Amount you owe |
| 2. | | | | <i>Property</i> (Official Form 106 f claim, at the bottom of the | SD) last page of Part 1 of Schedule D | \$70,317.00 |
| 3. | Schedule E/F | : Creditors Who I | Have Unsecured Claim | s (Official Form 106E/F) | | |
| | 3a. Copy the | total claims fron | n Part 1 (priority unsecu | ured claims) from line 6e of | Schedule E/F | \$0.00 |
| | 3b. Copy the | e total claims fron | n Part 2 (nonpriority un | secured claims) from line 6j | of Schedule E/F | + \$17,459.00 |
| | | | | | Your total liabilities | \$87,776.00 |
| | | | | | | |
| Р | art 3: Su | mmarize You | r Income and Exp | enses | | |
| 4. | Schedule I: V | our Income (Offic | cial Form 106I) | | | |
| •• | | | | Schedule I | | \$720.00 |

Schedule J: Your Expenses (Official Form 106J)

Copy your monthly expenses from line 22c of Schedule J.....

\$720.00

Case 19-40353-TLS Doc 1 Filed 03/07/19 Entered 03/07/19 16:00:34 Desc Main Document Page 34 of 51

| De | btor 1 | Marta L Aguilar | Case number (if known) | | | | |
|----|---|--|----------------------------|--|--|--|--|
| P | art 4: | Answer These Questions for Administrative and Statistics | al Records | | | | |
| 6. | Are you | u filing for bankruptcy under Chapters 7, 11, or 13? | | | | | |
| | No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. ✓ Yes | | | | | | |
| 7. | What k | at kind of debt do you have? | | | | | |
| | Ľ | our debts are primarily consumer debts. Consumer debts are those "incurremily, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statisti | | | | | |
| | ☐ Yo | this part of the form. Check this box and submit | | | | | |
| 8. | | he Statement of Your Current Monthly Income: Copy your total current mor Form 122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14. | athly income from \$720.00 | | | | |
| 9. | Copy tl | he following special categories of claims from Part 4, line 6 of Schedule B | E/ F : | | | | |
| | | | Total claim | | | | |
| | From P | Part 4 on Schedule E/F, copy the following: | | | | | |
| | 9a. Do | omestic support obligations. (Copy line 6a.) | \$0.00_ | | | | |
| | 9b. Ta | ixes and certain other debts you owe the government. (Copy line 6b.) | \$0.00 | | | | |

9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)

9e. Obligations arising out of a separation agreement or divorce that you did not report as

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

9d. Student loans. (Copy line 6f.)

priority claims. (Copy line 6g.)

9g. Total. Add lines 9a through 9f.

\$0.00

\$0.00

\$0.00

\$0.00

\$0.00

| Fill in this in | | | | |
|--------------------|--------------------------|--|---|--|
| Fill in this in | formation to i | dentify your case | : : | |
| Debtor 1 | Marta | L | Aguilar | |
| | First Name | Middle Name | Last Name | _ |
| Debtor 2 |) | Mari III Ni | | _ |
| (Spouse, if filing |) First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court fo | or the: DISTRICT OF | _ | |
| Case number | | | | ☐ Check if this is an |
| (if known) | | | | amended filing |
| Official Form | n 106Dec | | | |
| Declaration | Δhout an I | ndividual Debi | tor's Schedules | 12/15 |
| concealing prope | | | scriedules of afficilited Scrie | edules. Making a false statement, |
| \$250,000, or impr | • | money or property b | | a bankruptcy case can result in fines up to |
| \$250,000, or impr | risonment for up | money or property b to 20 years, or both. | y fraud in connection with | a bankruptcy case can result in fines up to 19, and 3571. |
| \$250,000, or impr | risonment for up | money or property b to 20 years, or both. | by fraud in connection with 18 U.S.C. §§ 152, 1341, 15 | a bankruptcy case can result in fines up to 19, and 3571. |
| \$250,000, or impr | gn Below or agree to pay | money or property b to 20 years, or both. | by fraud in connection with 18 U.S.C. §§ 152, 1341, 15 | a bankruptcy case can result in fines up to 19, and 3571. l out bankruptcy forms? |
| \$250,000, or impr | risonment for up | money or property b to 20 years, or both. | by fraud in connection with 18 U.S.C. §§ 152, 1341, 15 | a bankruptcy case can result in fines up to 19, and 3571. |

X /s/ Marta L Aguilar
Marta L Aguilar, Debtor 1

Date 03/07/2019
MM / DD / YYYY

Signature of Debtor 2

Date MM / DD / YYYY

| | | | | | _ | | | |
|------------|---|---|--|-------------------------------|---|-------|--|--|
| F | ill in this info | ormation to ider | ntify your case: | | | | | |
| D | ebtor 1 | Marta | L | Aguilar | | | | |
| | | First Name | Middle Name | Last Name | | | | |
| | ebtor 2 | First Name | Middle Name | LastNama | | | | |
| (5 | Spouse, if filing) | FIRST Name | Middle Name | Last Name | | | | |
| U | nited States Bar | nkruptcy Court for the | E: DISTRICT OF | | | | | |
| _ | ase number | | | | ☐ Check if this is an | | | |
| (if | known) | | | | amended filing | | | |
| — Оf | ficial Form | 107 | | | _ | | | |
| _ | | | ffaire for Ind | ividuals Filing for E | Sankruntov | 04/16 | | |
| | atement o | i i illanciai Al | | ividuals i lillig for L | Sanki upicy | 04/10 | | |
| cor you | rect informatio | n. If more space is se number (if know | needed, attach a s n). Answer every | separate sheet to this form. | both are equally responsible for supplying On the top of any additional pages, write ived Before | | | |
| 1. | What is your of Married ✓ Not marrie | current marital state | us? | | | | | |
| 2. | During the last 3 years, have you lived anywhere other than where you live now? | | | | | | | |
| | ☑ No | | | | | | | |
| | Yes. List all of the places you lived in the last 3 years. Do not include where you live now. | | | | | | | |
| 3. | (Community p | | • | • • | community property state or territory? ana, Nevada, New Mexico, Puerto Rico, Texas, | | | |
| | ✓ No ☐ Yes. Mak | e sure you fill out <i>Sc</i> | hedule H: Your Cod | debtors (Official Form 106H). | | | | |

| Debtor 1 | | Marta L Aguilar | Case number (if known) | | | |
|----------|--|---|---|--|--|--|
| P | art 2: | Explain the Sources of Your Income | | | | |
| 1. | Fill in the | I have any income from employment or from operate total amount of income you received from all jobs and the filing a joint case and you have income that you rece | ÷. | | | |
| | ☑ No □ Yes | . Fill in the details. | | | | |
| 5. | Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security; unemployment; and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are in a joint case and you have income that you received together, list it only once under Debtor 1. | | | | | |
| | List eac | h source and the gross income from each source sepa | rately. Do not include income that you listed in line 4. | | | |
| | ✓ No ☐ Yes | s. Fill in the details. | | | | |
| P | art 3: | List Certain Payments You Made Before | You Filed for Bankruptcy | | | |
| 6. | Are eith | ner Debtor 1's or Debtor 2's debts primarily consum | er debts? | | | |
| | □ No. | Neither Debtor 1 nor Debtor 2 has primarily cons "incurred by an individual primarily for a personal, fa | sumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as amily, or household purpose." | | | |
| | | During the 90 days before you filed for bankruptcy, | did you pay any creditor a total of \$6,425* or more? | | | |
| | | No. Go to line 7. | | | | |
| | | total amount you paid that creditor. Do no | a total of \$6,425* or more in one or more payments and the tinclude payments for domestic support obligations, such as clude payments to an attorney for this bankruptcy case. | | | |
| | | * Subject to adjustment on 4/01/19 and every 3 year | rs after that for cases filed on or after the date of adjustment. | | | |
| | ☑ Yes | Debtor 1 or Debtor 2 or both have primarily cons | umer debts. | | | |
| | | During the 90 days before you filed for bankruptcy, | did you pay any creditor a total of \$600 or more? | | | |
| | | ✓ No. Go to line 7. | | | | |
| | | | a total of \$600 or more and the total amount you paid that nestic support obligations, such as child support and alimony. ey for this bankruptcy case. | | | |

| Del | otor 1 | Marta L Aguilar | | Case number (if | known) _ | | | |
|---------|----------------------------------|--|--|---|------------|-------------------------------------|------------------|-----------|
| 7. | Insiders corpora agent, in | include your relatives; ar tions of which you are an | ny general partners; relatives of a officer, director, person in controls you operate as a sole propriet | payment on a debt you owed any any general partners; partnerships o l, or owner of 20% or more of their tor. 11 U.S.C. § 101. Include paym | of which y | ou are a genera curities; and an | al part y man | naging |
| | ✓ No ☐ Yes | . List all payments to an i | insider. | | | | | |
| 8. | | 1 year before you filed fo | or bankruptcy, did you make ai | ny payments or transfer any prop | erty on a | ccount of a de | bt tha | at |
| | Include | payments on debts guara | nteed or cosigned by an insider. | | | | | |
| | ✓ No ☐ Yes | . List all payments that be | enefited an insider. | | | | | |
| P 9. | art 4: | | ions, Repossessions, and | d Foreclosures by in any lawsuit, court action, or | administ | rative proceed | ing? | |
| Э. | List all s | - | rsonal injury cases, small claims | s actions, divorces, collection suits, | | - | - | ustody |
| | □ No ☑ Yes | . Fill in the details. | | | | | | |
| | se title | | Nature of the case | Court or agency | | Stat | us of | the case |
| Cit | ibank v | s. Marta L Aguilar | Collection | Hall County Court Court Name | | | - 🗆 | Pending |
| | | | | 111 W 1st Street | | | - 🗆 | On appeal |
| Cas | se numbe | r CI 18 2912 | | Number Street | | | ~ | Concluded |
| | | 01.10.20.12 | • | Grand Island | NE | 60001 | _ 💌 | |
| | | | | Grand Island City | State | 68801 ZIP Code | - | |
| 10. | seized, | 1 year before you filed for or levied? Ill that apply and fill in the | | r property repossessed, foreclose | ed, garnis | shed, attached | Ι, | |
| | | Go to line 11. Fill in the information be | elow. | | | | | |
| 11. | | | for bankruptcy, did any creditor refuse to make a payment be | or, including a bank or financial i cause you owed a debt? | nstitutior | ı, set off any | | |
| | ☑ No ☐ Yes | . Fill in the details. | | | | | | |
| 12. | | - | or bankruptcy, was any of your ceiver, a custodian, or another | r property in the possession of a official? | n assigne | e for the bene | fit of | |
| | ✓ No ☐ Yes | | | | | | | |

| Debtor 1 | | Marta L Aguilar | Case number (if known) |
|----------|----------------------|---|---|
| Pa | art 5: | List Certain Gifts and Contributions | |
| 13. | Within 2 | Pyears before you filed for bankruptcy, did you give any gifts with a | total value of more than \$600 per person? |
| | ✓ No ☐ Yes | . Fill in the details for each gift. | |
| 14. | Within 2 to any c | e years before you filed for bankruptcy, did you give any gifts or cont charity? | ributions with a total value of more than \$600 |
| | ✓ No ☐ Yes | . Fill in the details for each gift or contribution. | |
| Pa | art 6: | List Certain Losses | |
| 15. | | year before you filed for bankruptcy or since you filed for bankrupte saster, or gambling? | cy, did you lose anything because of theft, fire, |
| | ✓ No ☐ Yes | . Fill in the details. | |
| Pa | art 7: | List Certain Payments or Transfers | |
| 16. | | year before you filed for bankruptcy, did you or anyone else acting you consulted about seeking bankruptcy or preparing a bankruptcy | |
| | Include | any attorneys, bankruptcy petition preparers, or credit counseling agencie | es for services required for your bankruptcy. |
| | ✓ No ☐ Yes | . Fill in the details. | |
| 17. | anyone | year before you filed for bankruptcy, did you or anyone else acting who promised to help you deal with your creditors or to make paym | |
| | | nclude any payment or transfer that you listed on line 16. | |
| | ✓ No ☐ Yes | . Fill in the details. | |
| 18. | propert | 2 years before you filed for bankruptcy, did you sell, trade, or otherw y transferred in the ordinary course of your business or financial affa | airs? |
| | | both outright transfers and transfers made as security (such as granting on clude gifts and transfers that you have already listed on this statement. | of a security interest or mortgage on your property). |
| | ✓ No ☐ Yes | . Fill in the details. | |
| 19. | | 0 years before you filed for bankruptcy, did you transfer any propert a beneficiary? (These are often called asset-protection devices.) | ty to a self-settled trust or similar device of which |
| | ✓ No ☐ Yes | . Fill in the details. | |

| Deb | otor 1 | Marta L Aguilar | Case number (if known) |
|-----|-----------------|---|--|
| Р | art 8: | List Certain Financial Accounts, Instruments, Safe Depo | sit Boxes, and Storage Units |
| 20. | | l year before you filed for bankruptcy, were any financial accounts or i closed, sold, moved, or transferred? | nstruments held in your name, or for your |
| | Include | checking, savings, money market, or other financial accounts; certificates of pension funds, cooperatives, associations, and other financial institutions. | f deposit; shares in banks, credit unions, brokerage |
| | ✓ No ☐ Yes | . Fill in the details. | |
| 21. | • | now have, or did you have within 1 year before you filed for bankruptc ırities, cash, or other valuables? | y, any safe deposit box or other depository |
| | ✓ No ☐ Yes | . Fill in the details. | |
| 22. | ☑ No | ou stored property in a storage unit or place other than your home with . Fill in the details. | in 1 year before you filed for bankruptcy? |
| Р | art 9: | Identify Property You Hold or Control for Someone Else | |
| 23. | - | hold or control any property that someone else owns? Include any prin trust for someone. | operty you borrowed from, are storing for, |
| | ☑ No ☐ Yes | . Fill in the details. | |
| Р | art 10: | Give Details About Environmental Information | |
| For | the purp | ose of Part 10, the following definitions apply: | |
| ı | hazardou | nental law means any federal, state, or local statute or regulation conc is or toxic substance, wastes, or material into the air, land, soil, surfac a statutes or regulations controlling the cleanup of these substances, w | e water, groundwater, or other medium, |
| | | ns any location, facility, or property as defined under any environment or used to own, operate, or utilize it, including disposal sites. | al law, whether you now own, operate, or |
| | | <i>is material</i> means anything an environmental law defines as a hazardo e, hazardous material, pollutant, contaminant, or similar item. | us waste, hazardous substance, toxic |
| Rep | ort all no | otices, releases, and proceedings that you know about, regardless of w | then they occurred. |
| 24. | Has any law? | governmental unit notified you that you may be liable or potentially lia | able under or in violation of an environmental |
| | ▼ No □ Yes | . Fill in the details. | |

Case 19-40353-TLS Doc 1 Filed 03/07/19 Entered 03/07/19 16:00:34 Desc Main Document Page 41 of 51

| Del | otor 1 | Marta L Aguilar | | Case number (if known) | | | | | |
|------------|------------------|--|--|--|--|--|--|--|--|
| 25. | • | ou notified any governmental unit | of any release of hazardous ma | terial? | | | | | |
| | ✓ No ☐ Yes | s. Fill in the details. | | | | | | | |
| 26. | _ | | administrative proceeding unde | r any environmental law? Include settlements and | | | | | |
| | orders. | | | | | | | | |
| | ☑ No | | | | | | | | |
| | ☐ Yes | s. Fill in the details. | | | | | | | |
| Р | art 11: | Give Details About Your B | Business or Connections | to Any Business | | | | | |
| 27. | Within busine | - | uptcy, did you own a business o | or have any of the following connections to any | | | | | |
| | | A sole proprietor or self-employed | in a trade, profession, or other ac | tivity, either full-time or part-time | | | | | |
| | | A member of a limited liability com | npany (LLC) or limited liability part | nership (LLP) | | | | | |
| | F | A partner in a partnership An officer, director, or managing e | executive of a corporation | | | | | | |
| | | An owner of at least 5% of the vot | | ation | | | | | |
| | ✓ No. | No. None of the above applies. Go to Part 12. | | | | | | | |
| | ☐ Yes | s. Check all that apply above and fil | Il in the details below for each bus | iness. | | | | | |
| 28. | | 2 years before you filed for bankroncial institutions, creditors, or oth | | tatement to anyone about your business? Include | | | | | |
| | □ No | s. Fill in the details below. | | | | | | | |
| Р | art 12: | Sign Below | | | | | | | |
| | | | Financial Δffairs and any attach | ments, and I declare under penalty of perjury | | | | | |
| tha pro | t answer | s are true and correct. I understa | nd that making a false statemer uptcy case can result in fines up | t, concealing property, or obtaining money or to \$250,000, or imprisonment for up to 20 years, | | | | | |
| X | /s/ Mart | a L Aguilar | X | | | | | | |
| | Marta L A | Aguilar, Debtor 1 | Signature of Debtor 2 | | | | | | |
| | Date _ | 03/07/2019 | Date | _ | | | | | |
| Did | l you atta | ach additional pages to Your State | ment of Financial Affairs for Ind | ividuals Filing for Bankruptcy (Official Form 107)? | | | | | |
| Ø | No | | | | | | | | |
| | Yes | | | | | | | | |
| Did | l you pay | or agree to pay someone who is | not an attorney to help you fill o | ut bankruptcy forms? | | | | | |
| V | No | | | | | | | | |
| | | ame of person | | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). | | | | | |

Case 19-40353-TLS Doc 1 Filed 03/07/19 Entered 03/07/19 16:00:34 Desc Main Document Page 42 of 51

| Fill in this inf | Fill in this information to identify your case: | | | |
|---------------------------------------|---|----------------------------|----------------------|--|
| Debtor 1 | Marta First Name | L Middle Name | Aguilar Last Name | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | |
| · · · · · · · · · · · · · · · · · · · | | or the: DISTRICT OF | | |
| Case number | Tikruptcy Court it | or the. DISTRICT O | NEDIVASIVA | |
| (if known) | | | | |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Hold Secured Claims

| 1. | For any creditors that you listed in Part 1 of Schedule D: Creditors Who Hold Claims Secured by Property (Official Form 106D), |
|----|--|
| | fill in the information below. |

| fill in the inforr | fill in the information below. | | | | |
|---|--------------------------------|---|--|---|-----------|
| Identify the creditor and the property that is collateral | | What do you intend to do with the property that secures a debt? | | Did you claim the property as exempt on Schedule C? | |
| Creditor's name: | Reyna Auto Sales | | Surrender the property. Retain the property and redeem it. | | No Yes |
| Description of property securing debt: | 2013 Chevy Captiva | | Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: | | |
| Creditor's name: | Seterus Inc | | Surrender the property. Retain the property and redeem it. | | No Yes |
| Description of property securing debt: | property | | Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: | | |
| Creditor's name: | WFFNB/Slumberland | | Surrender the property. Retain the property and redeem it. | | No Yes |
| Description of property securing debt: | furniture | | Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: | | |

| Debtor 1 | Marta L Aguilar | | Case number (if known) |
|-------------|--|--|---|
| Part 2 | List Your Unexpired | Personal Property Leases | |
| fill in the | information below. Do not list | real estate leases. Unexpired leases are | ory Contracts and Unexpired Leases (Official Form 106G), leases that are still in effect; the lease period has not does not assume it. 11 U.S.C. § 365(p)(2). |
| Des | cribe your unexpired personal | property leases | Will this lease be assumed? |
| Nor | ne. | | |
| Part 3 | : Sign Below | | |
| | r penalty of perjury, I declare the mal property that is subject to a | | y property of my estate that secures a debt and |
| X /s/ M | arta L Aguilar | x | |
| Marta | L Aguilar, Debtor 1 | Signature of Debtor 2 | |
| Date | 03/07/2019 | Date | |
| | MM / DD / YYYY | MM / DD / YYYY | |

B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT DISTRICT OF NEBRASKA LINCOLN DIVISION

| ln | re Marta L Aguilar | Case No. | | |
|----|--|----------------------------|---------------------------------|--|
| | | Chapter | 7 | |
| | DISCLOSURE OF COMPENSATION OF | ATTORNEY FOR | DEBTOR | |
| 1. | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that compensation paid to me within one year before the filing of the perservices rendered or to be rendered on behalf of the debtor(s) in contents as follows: | etition in bankruptcy, or | agreed to be paid to me, for | |
| | For legal services, I have agreed to accept | \$ | 1,600.00 | |
| | Prior to the filing of this statement I have received | \$ | 1,600.00 | |
| | Balance Due | | \$0.00 | |
| 2. | The source of the compensation paid to me was: Debtor Other (specify) | | | |
| 3. | The source of compensation to be paid to me is: | | | |
| | ✓ Debtor ☐ Other (specify) | | | |
| 4. | I have not agreed to share the above-disclosed compensation with associates of my law firm. | h any other person unle | ss they are members and | |
| | ☐ I have agreed to share the above-disclosed compensation with an associates of my law firm. A copy of the agreement, together with compensation, is attached. | | | |
| 5. | In return for the above-disclosed fee, I have agreed to render legal ser | vice for all aspects of th | e bankruptcy case, including: | |
| | a. Analysis of the debtor's financial situation, and rendering advice to t bankruptcy; | the debtor in determinin | g whether to file a petition in | |
| | b. Preparation and filing of any petition, schedules, statements of affai | irs and plan which may b | pe required; | |
| | c. Representation of the debtor at the meeting of creditors and confirm | nation hearing, and any | adjourned hearings thereof; | |

Filed 03/07/19 Entered 03/07/19 16:00:34 Desc Main Case 19-40353-TLS Doc 1 Page 45 of 51 Document

B2030 (Form 2030) (12/15)

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

> 03/07/2019 /s/ DEREK L MITCHELL

Date

DEREK L MITCHELL DEREK L MITCHELL P.O. BOX 1227 102 N LOCUST ST **GRAND ISLAND NE 68802**

Phone: (308) 384-6009 / Fax: (308) 382-4878

Bar No. 19984

/s/ Marta L Aguilar

Marta L Aguilar

Case 19-40353-TLS Doc 1 Filed 03/07/19 Entered 03/07/19 16:00:34 Desc Main Document Page 46 of 51

UNITED STATES BANKRUPTCY COURT DISTRICT OF NEBRASKA LINCOLN DIVISION

IN RE: Marta L Aguilar CASE NO

CHAPTER 7

VERIFICATION OF CREDITOR MATRIX

| | The above named D | ebtor hereby verifi | es that the attach | ed list of creditors | s is true and correc | t to the best of his/he |
|------|-------------------|---------------------|--------------------|----------------------|----------------------|-------------------------|
| knov | vledge. | | | | | |

| Date | 3/7/2019 | Signature /s/ Marta L Aguilar Marta L Aguilar |
|------|----------|--|
| Date | | Signature |

Allied Collection Service 9301 Oakdale Ave Suite 205 Chatsworth CA 91311

Capital One/Dressbarn P O Box 30258 Salt Lake City UT 84130

CB-Younkers P O Box 182789 Columbus OH 43218

Chase Bank USA P.O. Box 15298 Wilmington, DE 19850

Citibank P O Box 790110 St Louis MO 63179

Kohl's Department Store P.O. Box 3115 Milwaukee, WI 53201

Levi Dominguez 1224 N Lincoln Ave Grand Island NE 68801

Reyna Auto Sales 411 N Vine St Grand Island NE 68801

Sears/CBNA P O Box 6282 Sioux Falls SD 57117 Seterus Inc 14523 SW Millikan Way Ste 200 Beaverton OR 97005

SYNCB/JC PENNY P.O. BOX 965007 ORLANDO FL 32896

Wells Fargo NA/Dillards P O Box 14517 Des Moines IA 50306

WFFNB/Slumberland CSCL DSP TM MAC N8235-04M P O Box 14517 Des Moines IA 50306

| L | ill in this inf | ormation to | identify your case: | : | | e box only as dire in Form 122A-1Su | | | |
|---------------------------|--|--|---|--|--|---|---------------------------------|-----------------|--|
| D | ebtor 1 | Marta First Name | L Middle Name | Aguilar Last Name | _ | no presumption of abu | | | |
| | ebtor 2 Spouse, if filing) | First Name | Middle Name | Last Name | 2.The calc | ulation to determine if a applies will be made u est Calculation (Officia | a presumption nder Chapter 7 | | |
| U | United States Bankruptcy Court for the: DISTRICT OF NEBRASKA | | | | | ins Test does not apply | | | |
| _ | ase number f known) | | | | of qualified military service but it could app later. | | | | |
| | | | | | ☐ Check if t | his is an amended filin | g | | |
| <u>O</u> 1 | fficial Form | 122A-1 | | | | | | | |
| CI | hapter 7 S | tatement o | of Your Current | Monthly Income | | | 12/15 | | |
| info are mil 122 | ormation applice exempted from litary service, c 2A-1Supp) with | es. On the top on a presumption omplete and file this form. | of any additional pages n of abuse because yo | neet to this form. Include the write your name and case u do not have primarily consion from Presumption of Ab | number (if knowr sumer debts or b | n). If you believe that ecause of qualifying | you | | |
| 1. | What is your | nat is your marital and filing status? Check one only. | | | | | | | |
| | | | | | | | | | |
| | — Manufact and consequent to fill and the consequent to the consequence of the consequenc | | | | | | | | |
| | — Married and consequent is NOT fill and the consequence of the conseq | | | | | | | | |
| | | Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11. | | | | | | | |
| | Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § | | | | | | | ies or that you | |
| | Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space. | | | | | | | | |
| | | | | | Column A Debtor 1 | Column B Debtor 2 or non-filing spouse | | | |
| 2. | • | vages, salary, ti vroll deductions). | ps, bonuses, overtime, | , and commissions | \$0.00 | | | | |
| 3. | Alimony and if Column B is | | ayments. Do not includ | de payments from a spouse | \$0.00 | | | | |
| 4. | expenses of regular contrib your depende | you or your depoutions from an unts, parents, and | e which are regularly poendents, including chi unmarried partner, memi d roommates. Include re not filled in. Do not inclu | ild support. Include bers of your household, egular contributions from | \$0.00 | | | | |

| Deb | otor 1 | Marta L Aguilar | | | Case number (if known) | | | |
|-----|---|---|---------------------|--------------------|------------------------|--------------------|---|--|
| | | | | | | Column A Debtor 1 | Column B Debtor 2 or non-filing spouse | е |
| 5. | Net inc | come from operating a busine | ess, profession, or | farm | | | | |
| | | | Debtor 1 | Debtor 2 | | | | |
| | Gross deduct | receipts (before all ions) | \$0.00 | | - | | | |
| | Ordina expens | ry and necessary operating - | \$0.00 | | Сору | | | |
| | | onthly income from a business, sion, or farm | \$0.00 | | here → | \$0.00 | | |
| 6. | Net inc | come from rental and other re | eal property | | | | | |
| | | | Debtor 1 | Debtor 2 | | | | |
| | Gross deduct | receipts (before all ions) | \$0.00 | | | | | |
| | Ordina expens | ry and necessary operating - | \$0.00 | | Сору | | | |
| | | onthly income from rental or eal property | \$0.00 | | here → | \$0.00 | | |
| 7. | Interes | st, dividends, and royalties | | | | \$0.00 | | |
| 8. | Unemp | ployment compensation | | | | \$0.00 | | |
| | | enter the amount if you conter under the Social Security Act. | | | | | | |
| | For | you | | \$0. | 00 | | | |
| | For | your spouse | | | | | | |
| 9. | | on or retirement income. Do not be defit under the Social Securi | | ount received that | t | \$720.00 | | |
| 10. | Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. | | | | | | | |
| | Total | mounts from separate pages, i | if any | | | | | |
| | | , , , | • | | + | | T | |
| 11. | Add lin | ate your total current monthly es 2 through 10 for each colund dd the total for Column A to the | nn. | 3. | | \$720.00 | + | = \$720.00 Total current monthly income |

| Debtor 1 | | M | arta L Aguilar | | Case number (if known) | | | | |
|----------|---|--|---|----------------------------------|--|------------|--|--|--|
| P | art 2: | | Determine Whether the Means | Геst Applies to You | | | | | |
| 12. | Calc | ulate | your current monthly income for the y | ear. Follow these steps: | | | | | |
| | 12a. Copy your total current monthly income from | | | line 11 | Copy line 11 here 😝 12a. | \$720.00 | | | |
| | | Multiply by 12 (the number of months in a year). | | | | X 12 | | | |
| | 12b. | The | e result is your annual income for this part | t of the form. | 12b. | \$8,640.00 | | | |
| 13. | Calculate the median family income that applies to you. Follow these steps: | | | | | | | | |
| | Fill in the state in which you live. | | | Nebraska | | | | | |
| | Fill in | the r | number of people in your household. | 1 | | | | | |
| | Fill in the median family income for your state and size of household | | | | | | | | |
| | | To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. | | | | | | | |
| 14. | How | How do the lines compare? | | | | | | | |
| | 14a. | | Line 12b is less than or equal to line 13 Go to Part 3. | . On the top of page 1, check b | ox 1, There is no presumption of abuse. | | | | |
| | 14b. | Line 12b is more than line 13. On the top of page 1, check box 2, <i>The presumption of abuse is determined by Form 122A-2</i> . Go to Part 3 and fill out Form 122A-2. | | | | | | | |
| P | art 3: | | Sign Below | | | | | | |
| | By: | signir | ng here, I declare under penalty of perjury | that the information on this sta | tement and in any attachments is true an | d correct. | | | |
| | | , , | | | , | | | | |
| | <i>,</i> , , | | l arta L Aguilar a L Aguilar, Debtor 1 | X Signa | ature of Debtor 2 | | | | |
| | | Date _. | 3/7/2019 | Date | | | | | |
| | | | MM / DD / YYYY | | MM / DD / YYYY | | | | |
| | If yo | ou ch | ecked line 14a, do NOT fill out or file For | m 122A-2. | | | | | |

If you checked line 14b, fill out Form 122A-2 and file it with this form.